

IMMUNIZATION UPDATE

SPRING 2004

PERINATAL HEPATITIS B PREVENTION EFFORTS SHOW IMPROVEMENT

The DOH Immunization Program Perinatal Hepatitis B Surveillance Team has completed collection and analysis of statewide perinatal Hepatitis B Surveillance data for calendar year 2002 births. The state surpassed the 2004 goal of 85% of infants born to HBsAg+ mothers receiving hepatitis B immune globulin (HBIG) and dose three by 12 months of age, increasing from 79% in 2001 to 88% in 2002. Data for both 2001 and 2002 births shows that 99% of infants reported to the

Immunization Program received HBIG and the first hepatitis B vaccine dose within 24 hours of birth. 100% received both within two to seven days of birth.

Post-testing infants after 12 months of age, decreased slightly, from 70% in 2001 to 63% in 2002. Household and sexual contact follow-up for pre-vaccination screening and completion of the hepatitis B series continues to be a challenge, with 74% starting the series and 55% completing the series.

Local public health hepatitis coordinators throughout the State serve a crucial role in guaranteeing the Perinatal Hepatitis B Program's effectiveness. Your efforts to provide case management and assure follow-up for these infants and their families make the program a success. Thank you for your dedication to this work!

For more information, please contact: Shana Johnny at 360-236-3698 or shana.johnny@doh.wa.gov or Claire Norby at 360-236-3565 or claire.norby@doh.wa.gov

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DOH DEVELOPING ELECTRONIC IMMUNIZATION REPORTING FOR SCHOOLS

Web-based electronic immunization status reporting for Washington State schools and licensed childcares will soon become a reality. This information makes up part of the annual Immunization Status Report, required by state law to be forwarded to DOH every November.

Approximately 2,400 schools and as many childcare facilities in Washington currently complete paper forms

and send them to the DOH Immunization Program for manual data entry. The labor intensive, time-consuming manual process is an inefficient use of resources. The web-based reporting process will greatly improve data quality and ease the reporting workload for schools and childcare facilities.

DOH will make a report module available via the internet for schools,

school districts and other state and local agencies to access aggregate school immunization status data.

Several schools around the state piloted a prototype during April 2004. Look for a fully operational system by school year 2004-2005.

For more information, please contact Ros Aarthun at 360.236.3527 or ros.aarthun@doh.wa.gov.

TETANUS-DIPHTHERIA VACCINE PROMOTION

Next time you shop for first aid supplies, you may come face-to-face with a tetanus-diphtheria (TD) vaccine "shelf talker." The focus of this health promotion campaign is on increasing adult TD vaccine coverage by getting the message out to shoppers via local pharmacies.

The Immunization Action Coalition of Washington (IACW) adapted the

campaign from materials developed by the National Foundation for Infectious Diseases. These materials were distributed to Fred Meyer Pharmacies in Western Washington, and to all local health departments to support local promotional efforts beyond the Fred Meyer pharmacies.

Fred Meyer Pharmacies will place the tear-off information sheets on

shelves displaying bandages and other first aid products. The shelf talkers encourage consumers to get their TD shots on the spot, administered by the pharmacist, or by their healthcare provider.

For more information, please contact Tom Kimzey at 360.236.3556 or tom.kimzey@doh.wa.gov.

PNEUMOCOCCAL CONJUGATE VACCINE (PCV7) SHORTAGE

As was widely reported and discussed in early and mid-March, CDC recommended that all health-care providers temporarily suspend routine administration of both the third and fourth PCV7 doses to healthy children. Wyeth Vaccines, the only U.S. supplier of PCV7 (marketed as Prevnar®), continues to have problems with its PCV7 vial filling production line. Shipments have been delayed, and shortages could continue beyond summer 2004 and become widespread.

It's important to remember that children with certain high-risk health conditions such as sickle cell anemia and immune system disorders *should receive the complete four-dose series*. Although limited data support a two-dose schedule among infants, it will result in less disease than vaccinating certain children with three doses and not vaccinating others.

Unvaccinated, healthy children aged 12-23 months should receive a single dose of PCV7, rather than

the usual two doses.

The DOH Immunization Program continues to monitor the situation closely, keeping in close contact with CDC's National Immunization Program and the manufacturer. For more information, please contact Paul Gardipee at 360.664.2183 or paul.gardipee@doh.wa.gov.

MEASLES OUTBREAK

A measles outbreak has affected adoptive families in Washington State, with confirmed cases for seven adoptees: one from Snohomish County and six from King County.

There were 12 children in the group, eight of whom now live in Washington. One child in the Washington group did not have measles symptoms. Of the remaining four children, one child

living in Maryland and another in New York State have confirmed measles. A child in Alaska and another child in Florida are not suspected of having measles. CDC is involved in the multi-state investigation.

On April 16, CDC recommended a temporary suspension of adoption proceedings for children from agency that housed infected children--the Zhuzhou Child

Welfare Institute in China's Hunan Province.

DOH Immunization Program staff members have worked closely with their counterparts at the LHJs and with those at Communicable Disease Epidemiology in responding to this outbreak. For more information, please contact Pat deHart at 360.236.3537 or pat.dehart@doh.wa.gov.

A measles outbreak has affected adoptive families in Washington State

PARTNERING TO PROMOTE FULL IMMUNIZATION OF PREGNANT WOMEN

The Immunization Program and Maternal and Infant Health section of MCH are working together to protect women and their newborns from the consequences of vaccine preventable diseases. This collaboration promotes full immunization of pregnant women and aims to increase provider and patient awareness of the importance of vaccination.

The work focuses on reaching obstetricians and gynecologists, midlevel providers, and pregnant

women about the importance of considering immunizations during pregnancy. An article on immunization during pregnancy was submitted to the Washington Association of Obstetricians and Gynecologists Newsletter *DIALOGUE*. Additionally, a paragraph describing the importance of appropriate immunization of pregnant women was added to the "Routine Prenatal Care" section of the Maternal and Infant Health/WIC publication "Nine

Months to Get Ready." Information about the importance of immunization prior to conception and during pregnancy will be proposed for the next revision of the Perinatal Record, which is used by providers throughout the state.

Please contact Jeanette Zaichkin at jeanette.zaichkin@doh.wa.gov or 360-236-3582 or Shana Johnny at shana.johnny@doh.wa.gov or 360-236-3698.

ALERT— MEXICAN IMMUNIZATION RECORDS

The DOH Immunization Program has received reports that many immunization records from Mexico have dates written in pencil. This penciled-in information has been interpreted by some schools as documentation of vaccine administration. Mexican public health officials use pencil to *indicate when the next dose is due*, not that the child received vaccine on that date.

Please be mindful when reviewing these records that the student may actually need more vaccines than those the school has identified.

Mexico has been routinely giving MMR since 2001. It may be documented as “triple viral;” Records marked as “doble viral” refer to measles and rubella only. The five-valent vaccine given in

Mexico (“Pentavalente” or Quintuple) contains DTP, hepatitis B and Hib antigens.

Please share this information with your providers and school nurses. For more information, please contact your Immunization Program Nurse Consultant.

INFLUENZA UPDATE

On April 8, 2004, the Centers for Disease Control provided preliminary estimates for Washington State’s childhood influenza vaccine for the 2004–2005 influenza season. The DOH Immunization Program will order the maximum amount of influenza vaccine allowed by CDC’s National Immunization Program. The state-supplied pediatric prefilled syringe allocation is estimated to be double the amount allocated in 2003/2004. For multi-dose vial influenza vaccine, the allocation is estimated to be triple the amount allocated in 2003/2004.

We encourage providers to place private orders for influenza vaccine for individuals in their practice who are not eligible to receive state-supplied childhood influenza vaccine. Parameters for using state-supplied childhood influenza vaccine include:

- Pediatric (thimerosal free) prefilled syringes should be used for children who are:
 - * from six months up to the second birthday
 - * less than three years of age who are at high-risk
 - * less than three years of age who are household contacts of high-risk persons
- The multi-dose vial (thimerosal containing) presentation should be used for children from three through 18 years of age, who have high-risk health conditions, or are household contacts of high-risk persons.
- The CDC allocations for children 6 through 23 months of age and children 2 through 18 years of age is based on an anticipated uptake of 40%. Allocations for household

contacts less than 19 years of age are based on a 10% uptake.

For planning purposes, Local Health Jurisdictions can estimate their allocations by multiplying their 2003/2004 allocation of the pediatric prefilled syringe presentation x 2, and multiplying their 2003/2004 multidose vial allocation x 3.

LHJs may contact Paul Gardipee at (360) 664-2183, or Steve Bichler at (360) 236-3555 for tentative county allocations. Final amounts will be provided to each LHJ, once CDC has finalized contract negotiations. For general questions about this issue, contact Jan Hicks-Thomson at (360) 236-3578, or Jan.Hicks-Thomson@doh.wa.gov.

The state-supplied pediatric prefilled syringe allocation is estimated to be double the amount allocated in 2003/2004

IMMUNIZATION PROGRAM

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STAFF CHANGES

Holly Jones rejoined the Immunization Program as a Secretary/Administrative on March 29.

Justin Warner joined the Immunization Program on May 10. Justin will work at the Distribution Center.

EDUCATION / OUTREACH MATERIALS

Many Local Health Jurisdictions may have been contacted by Desautel Hege Communications for input and review of several education and awareness materials under development for the Immunization Program. Material development will continue through June 2004.

In July, the Immunization Program will welcome its new health educator, Michelle Perrin, to the Program. Michelle will provide leadership in planning the implementation and integration of these efforts. These materials are intended to enhance our ability to promote immunizations for several focus areas:

- **International Adoption**

Materials – a provider packet, complete with a quick reference for providers on recommended vaccinations, a brochure to assist with parent education, and two reference articles regarding international adoption is in the review process. The parent brochure is intended as a stand-alone piece for physicians, adoption

agencies and others to distribute to parents considering adopting a child from another country. The materials are being tested with parents, adoption agencies, and providers.

- **Appropriate use of Immunization Exemptions for Schools** – a fact sheet and materials packet are under development to support school education, outreach and awareness efforts related to school exemptions. The piece focuses on education about the appropriate use of exemptions for school personnel and parents. Ruth McDougall serves as the lead Immunization Program Staff member on this effort, coordinating school nurse input.
- **Varicella Vaccine Promotional Materials** – The DOH Immunization Program is

working with CHILD Profile to develop an insert promoting varicella vaccination designed to be a part of the 12 – 18 month CHILD Profile mailing. A teen promotional poster has also been developed. Both pieces may also be used for distribution to other target groups as part of immunization education and awareness efforts.

- **Fourth DTaP Promotion** – An insert designed to be part of the CHILD Profile mailings to families with children who will turn 15 – 18 months of age is in draft stages. Desautel Hege continues development of the insert and other materials, including parent reminder cards, chart stickers, and media campaign materials as part of general fourth DTaP Promotional efforts.